

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT
(Under 37 CFR 1.97(b) or 1.97(c))

Docket No.
ART03.03

In Re Application Of: STEVEN EK

SEP 02 2004

Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/789,545	February 27, 2004		32047	3731	9474

Title: ARTICULAR SURFACE IMPLANT

Address to:

**Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

37 CFR 1.97(b)

1. The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.

37 CFR 1.97(c)

2. The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(b), provided that the Information Disclosure Statement is filed before the mailing date of a Final Action under 37 CFR 1.113, a Notice of Allowance under 37 CFR 1.311, or an Action that otherwise closes prosecution in the application, and is accompanied by one of:

the statement specified in 37 CFR 1.97(e);

OR

the fee set forth in 37 CFR 1.17(p).

**TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT
(Under 37 CFR 1.97(b) or 1.97(c))**

Docket No.
ART03.03

In Re Application: **STEVEN EK**

Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/789,545	February 27, 2004		32047	3731	

Title: **ARTICULAR SURFACE IMPLANT**

Payment of Fee

(Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))

- A check in the amount of _____ is attached.
- The Director is hereby authorized to charge and credit Deposit Account No. as described below.
 - Charge the amount of _____
 - Credit any overpayment.
 - Charge any additional fee required.
- Payment by credit card. Form PTO-2038 is attached.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Certificate of Transmission by Facsimile*

I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. _____)

(Date) _____

Signature

Edmund P. Pfleger
Typed or Printed Name of Person Signing Certificate

*This certificate may only be used if paying by deposit account.

Signature

Certificate of Mailing by First Class Mail

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-14" August 31, 2004.

April Davis
(Date)
Signature of Person Mailing Correspondence

APRIL DAVIS

Typed or Printed Name of Person Mailing Certificate

Dated: **August 31, 2004**

Edmund P. Pfleger

Reg. No. 41,252

Grossman Tucker Perreault & Pfleger, PLLC

55 South Commercial Street

Manchester, NH 03101

CC:

INFORMATION DISCLOSURE CITATION

(Use several sheets if necessary)

SEP 02 2004

ATTY DOCKET NO.

ART03.03

APPLICATION NO.

10/789,545

APPLICANT(S)

EK

FILING DATE

FEBRUARY 27, 2004

GROUP ART UNIT

3731

U.S. PATENT DOCUMENTS

*EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE

U.S. PATENT APPLICATION PUBLICATIONS

*EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
1		US 2004/0133276 A1	07/08/2004	LANG ET AL	623	14.12	10/07/2003

FOREIGN PATENT DOCUMENTS

		DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION	
							YES	NO

OTHER DOCUMENTS (Including Author, Title, Date, Pertinent Pages, Etc.)

EXAMINER

DATE CONSIDERED

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.